

of prevention and education programs that we ought to be doing for young people in this country. But that statement of the Helms-Burton amendment said to the world, you have got the problem, do not bring it over here. Clearly, this was not looking at our own position.

Now, the reason that conference in Barcelona was so important is that it is starting to talk about more and more advances of treatment and more and more complicated illnesses being found. There is all kinds of research there, but one must not lose sight of the fact that education and prevention still are the best hope for the world. We can have retroviral therapy, and we want that, and we should push the drug companies, and we should do everything possible, but administering those drugs and monitoring them, and it is as somebody described it, savage therapy. It is tough treatment. It is not an easy regimen. It has only so much effectiveness.

The real thing we have to get is people educated and aware of their own status. That is not expensive. If we would spend the money for the diagnostic tools that we have available and developed in this United States by USAID, we could make it possible for everyone to know their status. So at least they would know whether or not they were passing it on to their partner. But we do not put our money where our mouth is.

We say we want to do things for the world. We go and we make speeches, we put up a little bit of money, and then we double-count it so it looks like more. But the fact is, the United States is not putting up their fair share. Kofi Annan asked for an enormous contribution, said how much would be necessary, and the United States put up a pitiful amount.

Our contribution is something like 0.1 percent of our gross domestic product. The Norwegians, the Swedes, the Danes, the Dutch put up 0.2, 0.3 percent. Why can these little countries do that and we, the country with all the resources in the world, not put the money into the Global AIDS Fund that Kofi Annan has set up, or through our USAID? Or there are many ways in which we could put that money out there, but it requires a commitment.

Now, thanks to the work of people like the gentlewoman from California (Ms. LEE) and the gentlewoman from California (Ms. MILENDER-MCDONALD) and other Members of the Congress, the devastation that is occurring in Africa is now much better understood than it was 10 years ago.

I remember in 1991 having lunch with the President of Zambia, Mr. Kaunda, who said, what will I do with 500,000 orphans? Today, we are dealing with those orphans worldwide. And if we do not do something about it, it will not be 500,000, it will be millions and millions and millions of orphans. We must do more.

HIV AND AIDS IN AFRICA

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Jersey (Mr. PAYNE) is recognized for 5 minutes.

Mr. PAYNE. Mr. Speaker, let me begin by commending the gentlewoman from California (Ms. LEE) for the outstanding work that she has done in her tireless efforts to bring to the attention of America, the Congress, and the world the need for us to do much more as relates to the HIV and AIDS pandemic; and also the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN), a physician, who also has been spearheading this. Let me commend them for attending the 14th International Conference on AIDS where the question of HIV and AIDS, of course, was the center of discussion.

It has been indicated that AIDS will kill at least 68 million people by 2020 unless rich nations invest far more in global prevention, says a report that was released last week. It is now clear to me that we have only seen the beginning of the worst epidemic in human history, says Peter Piot, Director of the joint United Nations program for HIV and AIDS, UNAIDS. He said that the disease will not only destabilize Africa but it will affect economic and political stability worldwide, particularly when the epidemic begins to peak in the most populated countries, such as China, India, and Russia.

The UNAIDS update, released ahead of the planned meeting that started on July 7 in Barcelona, indicates the number will grow to 40 million people worldwide, there has been a jump of 6 million cases, new cases, in 2 years, and that the infection rate continues to steadily rise in India, China, Russia, and Eastern Europe.

So we have a very, very serious situation. This terrorism is far more deadly than anything we could ever imagine. As we have indicated, the numbers are staggering, and AIDS is ripping through every continent destroying everything in its path. But let me concentrate a bit on Africa.

Botswana is currently experiencing the worst of the pandemic, with over 30 percent of its population affected. South Africa has also been hard hit. It is estimated that one out of three adults are infected. We have seen, to date, with President Mbeki, that there currently is really no national agenda to deal with the problem. We have seen statistics from Zimbabwe which say that 35 percent of that population has been infected with HIV and AIDS.

In many instances, the largest number of victims are from the public service sector: teachers, civil servants. So we can imagine what that will mean for most of the developed world when we are losing the leaders in those countries, with 14 percent of the teachers in South Africa infected. The rate is expected to increase to 30 percent in 10 years. So we have a very, very serious problem.

What we need to do, though, is to increase the amount of funds that are available. On the eve of the G8 meeting, President Bush announced a new initiative to address the pandemic through a pledge of an additional \$500 million over 3 years to help prevent mother-to-child transmission in parts of Africa and the Caribbean. As little as a single dose of medication to mother and child at birth is reported to prevent transmission 50 percent of the time.

While this is a positive step, it does not address the problem itself. The disease many times is transmitted through sexual activity, but this initiative focuses on the least politically sensitive aspect of care and treatment. U.S. AIDS programs, through the Agency for International Development, focus on education and do not offer treatment. Fewer than 2 percent of the people living with AIDS in sub-Saharan Africa have access to antiretroviral drugs that are saving lives and improving the quality of life for those who are fortunate enough to receive them.

So focusing primarily on the innocent newborns, Bush's pledge leaves out women and children and communities and families. So I urge that we push and stress that the U.S. House of Representatives step up to the plate and offer additional funding.

BARCELONA CONFERENCE ON HIV-AIDS

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Ohio (Mrs. JONES) is recognized for 5 minutes.

Mrs. JONES of Ohio. Mr. Speaker, I stand here, along with my colleagues, to commend the gentlewoman from California (Ms. LEE) for her leadership on the issue of the AIDS pandemic internationally. My colleague already read the declaration from the Barcelona conference. I am going to read the whereas clauses, because I think they set forth specifically the status of this AIDS pandemic internationally.

"Whereas every single day AIDS claims 8,500 lives, or the equivalent of three World Trade Center disasters daily;

Whereas by December 2001, 40 million people were living with HIV-AIDS, and by 2005 an estimated 100 million will be infected;

Whereas more than 40 million children, most of them in developing nations, will be orphaned by AIDS by 2010;

Whereas the World Health Organization this year has stated that the antiretroviral treatment is medically essential and has issued specific treatment guidelines, monitoring standards, and regimen recommendations;

Whereas those on treatment represent less than 2 percent of all those infected with HIV because such treatment is almost completely unavailable in developing nations;